

ACTIVE MILITARY PERSONNEL DISCOUNT REQUEST

(This is Confidential)

Application must be accompanied by a copy of your Active Duty Service Identification Card. Discounts will be applied to classes and programs for eligible dependents and will not exceed 10% or \$10 per class or program. Discounts are not available for on-line registrations.

Applicant Name: Last First Middle Initial

Address City Zip

Home # Work #

List all Immediate Family Dependents	Birthdate (if under 18)
1)	
2)	
3)	
4)	
5)	
6)	
7)	
8)	
9)	
10)	

I affirm to the best of my knowledge and belief that the above statements are true.

Signature Date

FOR OFFICE USE ONLY

I hereby certify that the above family is eligible for the Active Military Personnel Discount of 10% per activity/program (will not exceed \$10 per activity or program).

Registration Supervisor's Signature

Date

Application expiration date